CENTRAL FAX CENTER

FROM HARPMAN AND HARPMAN 330 758 7507 NOV 0 4 2005 NOV 5 2005 3:43/ST. 3:43/No. 6660108620 P 1

CERTIFICATE OF TRAPPlicant(s): Andrew Dem	RANSMISSION BY FAC	SIMILE (37 CFR 1.8)	Docket No. 4426							
Application No. 10/829,077	Filing Date April 22, 2004	Examiner Goodman, Charles	Group Art Unit 3724							
Invention: SELF OPENING FOLDING KNIFE										
I hereby certify that this Amendment										
(Identify type of carrespondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 571-273-8300										
On November 4, 2										
R.C. Harpman (Typed or Printed Name of Person Signing Certificate)										
RCharman										
(Signature)										
			•							
	Note: Each paper must ha	ve its own certificate of mailing.								
	·									
			•							
			,							

P18/REV02

CENTRAL FAX CENTER FROM HARPMAN AND HARPMAN 330 758 7507 (SAT) NOV 5 2005 3:43/ST. 3:43/No. 6660108620 P NOV 0 4 2005

RECEIVED

AMENDMENT TRANSMITTAL LETTER (Small Entity) Applicant(s): Andrew Demko						Docket No. 4426				
Application No. 10/829,077			2 S	Customer N 27149	10.	Group Art Unit 3724	Confirmation No. 6017			
Invention: SELF OPENING FOLDING KNIFE										
	COMMISSIONER FOR PATENTS:									
Transmitted herewith is an amendment in the above-identified application. Applicant claims small entity status. See 37 CFR 1.27										
The fee has been	calculated and is trans	smitted as shown below	l.							
		CLAIMS AS AM	IENDE	<u> </u>						
	CLAIMS REMAINING	HIGHEST#	NUMB	ER EXTRA		RATE	ADDITIONAL			
	AFTER AMENDMENT	PREV. PAID FOR	CLAIMS	SPRESENT			FEE			
TOTAL CLAIMS	6 -	20 =	 	0	x	\$25.00	\$0.00			
INDEP, CLAIMS	2 -	3 =	<u></u>	0	x	\$100.00	\$0.00			
Multiple Dependen	nt Claims (check if app	<u> </u>					\$0.00			
		TOTAL ADDITIONAL I	FEE FU)R THIS AMI	ENL)MENT	\$0.00			
No additional fee is required for amendment. Please charge Deposit Account No. In the amount of A check in the amount of to cover the filling fee is enclosed. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. Any additional filling fees required under 37 C.F.R. 1.16. Any patent application processing fees under 37 CFR 1.17. Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card information and authorization on PTO-2038. Dated: November 4, 2005 R.C. Harpman, Reg. No. 29:802 I cartify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class										
mall In an envelope addressed to "Commissioner for Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a (Oate))] Signature of Person Mailing Correspondence Typed or Printed Name of Person Mailing Correspondence							ioner for Patents, P.Q. FR 1.8(a)] on			
Lypes of France Name of Fernan Maning Correspondence										

RECEIVED CENTRAL FAX CENTER

Appl. No.

: 10/829,077

NOV 0 4 2005

Applicant

: Andrew Demko : April 22, 2004

Filed For

SELF OPENING FOLDING KNIFE

TC/A.U.

3724

Examiner

Goodman, Charles

Docket No.

4426

Customer No.

27149

Confirmation No.

6017

Date: November 4, 2005

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office action of August 11, 2005, please amend the above identified application as follows:

Amendments to the claims begin on page 2 of this paper.